Supplying the following information will assist the Department Director in considering your interest in serving on a board or commission.						
NAME				DATE		
HOME ADDRESS HOME PHONE				HOME PHONE N	I IUMBER	
CITY			STATE		ZIP CODE	
BUSINESS ADDRESS			OFFICE PHONE NUMBER		NUMBER	
CITY		STATE			ZIP CODE	
PART 1						
Please indicate the area in which you have an interest. Please indicate your preference in order using 1, 2, 3, etc. Indicate limited or no interest by leaving area blank.						
	Air Conservation	Wells				
	Clean Water		Safe Drinking Water			
	Hazardous Waste		Small Business			
	Dam and Reservoir Safety		Soil and Water Districts			
	Land Reclamation		Solid Waste			
	Historic Preservation		Unmarked Human Burials			
	State Parks		Missouri Energy Policy			
	Environmental Improvement and Energy Resources					
In answering the following items, please use back of this sheet or a separate sheet for additional information. A resume may be attached in lieu of completing Parts 2 and 3.						
PART 2						
COMMUNITY ACTIVITIES – PLEASE LIST COMMUNITY, PROFESSIONAL AND CHARITABLE ASSOCIATIONS YOU HAVE BEEN ASSOCIATED WITH, AND CURRENT OR PAST EXPERIENCE SERVING ON SIMILAR BOARDS OR COMMISSIONS.						
PART 3 EDUCATION						
EMPLOYMENT						
PART 4						
PLEASE INDICATE BRIEFLY THE REASON YOU WISH TO SERVE ON A SPECIFIC BOARD(S).						
FOR MORE II	NFORMATION:	PLEASE RET		ETED FORM TO	):	
			ri Department of Natural Resources			
1-800-361-	4827	P.O. Box 17	x 176			